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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/573357
Filing Date	03-23-2006
First Named Inventor	Meredith Lunn
Art Unit	3751
Examiner Name	MAUST, TIMOTHY LEWIS
Attorney Docket Number	101046.0001US

**I hereby revoke all previous powers of attorney given in the above-identified application.**☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number:

24392

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
Customer Number:

24392

**OR**☐ Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Jeffrey John Grossmann

Date

12/17/08

Telephone

973-886-2504

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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Signature

Name

Mark Powers Christman

Date

1/5/2009

Telephone

770 262 1256

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PTO/SB/92 (01-06)

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Signature

Name

Meredith Lunn

Date

1/5/09

Telephone

(415) 269-0159

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Signature

*Maxime Guimond*

Name

Maxime Guimond

Date

01/08/09

Telephone

312-550-4895

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